Surveyor GR ASSIGNM		IGNMENT (Office)	ENT (Office)	
From (Person):	rina Chia San San of	FCL	Date/Time: 9.10.19 11	
Estimated Cost:		Bill to:		
	PRES / OD RES / EVA / INV No: SIP 1734K	/ MV / CS	Insured: SH (7670) Tel: 6453625 6	
at Workshop m/s	Kum chuw motor		Tel: 6453625 6	
of 160 Sn r	Ting bove \$05-08			
Policy No:		Claim No:	DIGO W459 MPSH	
Sum Insured:		Excess:		
Make of Veh:	N N		D.O.A. 5.10.2019	
	EP. / REV 24 HRS		H.O.D. Endorsement:	
Date/Time: 9.10.	19 12.06 pm Person Con	ntacted: Alan	Vehicle IN OUT	
	ction/Instruction (X) Es	timato		
Date/Time A				
Date/Time A	LE 1734K- NSIINCI	In 17686/ KH43	DOA: 05/10/2019	
	LE 17346-NSIINCH	90 17686/KHf3		
2	LF 17346- NS/ INC) HC 7670J-NS/ NC	90 17686/KHf3		
2	LE 17346-NSIINCH	90 17686/KHf3		

Simplific: [10] REF: FC1	
Sirveyor: ASS	IGNMENT
	Or 1221010 16 Aug
From: Date:	Type: McCar / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
Estimated Cost:	Truck / Trailer or
OD / TP) WS / TP RES / OD RES / EVA / INV / MV	11 1 1/20/ 11/6
To Inspect Vehicle No:	4.1
at Workshop m/s kum Chew	11/ -//
of	op.reading 111017
Insured:	Eng/No: ,
Policy No.	C/No: RUM113(43.
Claims No.	Gen. Cond: Good / Fair / Poor / Burnt
Sum Insured: Excess:	Steering: Ino Ger / Jammed / Leaked / Burnt or
(Client's Record)	Brake: Inorder / Jammed / Leaked / Burnt or
Make of Veh:	Modi: Nil / S/Rim / STDA/Rim or
	Tyre Size: F: 25/60 R16"
(Policy Condition)	Ř: 1
Remark: The veh had commenced its N/S O/S	BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
repair at the time of inspection.	TOYOTYOKO or
Bal. or Market Value: 965	Front Rear
IDAC Accident Rport: Consistent? : Yes or No	R/Bal. R/Bal. S
GIA / PR Seen: Consistent? : Yes or No	L/Bal. L/Bal.
Est. Repairs: days Res.: Yes or No	D.O.A. D.O.I. 09-10-
Lum Sum: % _ 3 Val.: Yes or No	Survey held at
CA / REV / REP. / 24 HRS	Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or
Vehicle: IN / OUT Date: Person Contacted:	
Date / Time Action / Instruction	The U/C / Chassis frame / Body Structure affected due to co
COZ, V3729	•
61 (704)	
γ.	
Date/Time, File Pass to? : Preli. Report	Days Of Repair:
1) 21 10 MM/Ar :: Final Report	Resurvey No. of Trip: 2 Survey Fee:
DaterTime, File Return to?	Transportation: Site Insp (\$)S+RS,SI
2) Add Ea	
2) Add Fe	Interview (\$) Photos
	: Interview (\$) Photos
Report Format : PRQ Lump Sum / I.B.I: (\$: Interview (\$) Photos Others



MS First Capital Insurance Limited co.Reg. No. 195000106C GST Reg. No. M2-0001676-9 6 Raffles Quay #21-00 Singapore 048580 Tel: (65) 6222 2311 Fax: (65) 6222 3547

Claims & Motor Underwriting Dept: 36 Robinson Road #16-01 City House Singapore 068877 Tel: (65) 6507 3848 Fax: (65) 6507 3849 www.msfirstcapital.com.sg

MOTOR SURVEY ASSIGNMENT

Date

08-10-2019

Our Ref No. D19006459MFSH

Accident Date

05-10-2019

Claim Type. Third Party

Insured Vehicle

SHC7670J

Third Party Vehicle. SLF1734K

Survey Location

160, SIN MING DRIVE #05-08 SIN MING AUTOCITY

Contact Person.

XIAO ZHU

Contact No.

64536256/0

Fax No. 0

Survey Type

WITHOUT PREJUDICE:

Appointed

Surveyor

LKK AUTO CONSULTANTS PTE LTD

Contact Person

NA

Fax No. 68416315

Contact Number.

NA

FOR DIRECT SETTLEMENT

Please submit to us the Tax Invoice together with letter of claim for Rental OR Loss of use (based on NIMA Benchmark rates) together with your survey report.

THIRD PARTY SURVEY REQUEST

Cc: Workshop

KUM CHEW MOTOR

WORKSHOP

Attention. NIL

Cc: TP Solicitor

NA

TP Solicitor Fax No. NA

Officer Incharge

MERINA CHIA SAN SAN

IMPORTANT NOTE

Kindly submit the survey report via CWS within 14 days for survey assignment and 7 days for re-inspection.

This is a computer generated letter, no signature required.

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Singapore NRIC	
Owner ID:	939D	
Maria de la companio		
Vehicle No.:	SLF1734K	
Vehicle to be Exported:	No	
Intended Deregistration Date:	09 Oct 2019	
Vehicle Make:	HONDA	
Vehicle Model:	VEZEL 1.5X CVT	
Primary Colour:	Silver	
Manufacturing Year:	2016	
Engine No.:	L15B4033148	
Chassis No.:	RU11113143	
Maximum Power Output:	96.0 kW (128 bhp)	
Open Market Value:	\$19,704.00	
Original Registration Date:	16 Aug 2016	
First Registration Date:	16 Aug 2016	
Transfer Count:	2	
Actual ARF Paid:	\$9,704.00	
PARF Eligibility:	Yes	
PARF Eligibility Expiry Date:	15 Aug 2026	
PARF Rebate Amount:	\$7,278.00	
COE Expiry Date:	15 Aug 2026	
COE Category:	A - Car up to 1600cc & 97kW (130bhp)	
COE Period(Years):	10	
QP Paid:	\$52,503.00	
COE Rebate Amount:	\$35,961.00	
Total Rebate Amount:	\$43,239.00	

The information contained herein is correct as at 09 Oct 2019

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- 2. This Form must be completed by the Policyholder and/or the Authorised Driver.
- 3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to repudiate policy liability.
- 4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- 5. Any false reporting may be referred to the Police for investigation.
- 6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
- 7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available

aforesaid.	
文章 (1975年) 1975年 1975	ACCIDENT STATEMENT
Date Of Report	07/10/2019 15:30
Date Of Accident	05/10/2019 19:30
Exact Location Of Accident	JURONG WEST CENTRAL 3 (OUTSIDE JURONG POINT)
Country/State of Loss	SINGAPORE
TO SERVICE STATE OF THE PARTY O	ETAILS OF OWN VEHICLE
Vehicle Registration Number	SLF1734K
Insured/Policyholder	
Name Of Registered Owner	NG SWEE AUN GARY (HUANG RUI'AN)
NRIC No	S7203939D
Email Address	NGSWEEAUN@YAHOO.COM.SG
Mobile Phone No	(LOCAL) +65-81218072
Alternative Phone No	OTHERS-81218072
Vehicle Particulars	
Manufacturer	HONDA
Model	VEZEL
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE CAR
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO

5097321193-01 Policy Number

Cover Note Number

Driver

NG SWEE AUN GARY (HUANG RUI'AN) Name of Driver

NRIC No S7203939D 28/01/1972 Date Of Birth **INDOOR** Occupation Date Of Driving Pass 07/07/1995

Driving Experience 24 YEARS AND 2 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-81218072

Fax Number

Contact Number OTHERS-81218072

EMail Address NGSWEEAUN@YAHOO.COM.SG Address

BLK 671C JURONG WEST STREET 65

#05-118

Postcode

643671

OWNER

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident

COLLISION - CHANGE/CROSS LANE

Weather Conditions

CLEAR

Road Surface

DRY

Other Information

Was any foreign vehicle involved in this accident?

NO

Number of vehicles (including own vehicle)

involved in the accident

2

Was any body injured in the Accident?

NO

Was any injured conveyed to hospital by

ambulance?

YES

Was any other material or property damaged? I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

NO

Number of Passengers (Including Driver)

1

Details of Police Action

Was the accident reported to the police?

NO

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

REFER TO ATTACHED

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Remarks/ Reasons:

VIDEO IS WITH OWNER

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SHC7670J

Vehicle Make/Model/Colour

Details Of Properties

TAXI

Vehicle Category Name of Driver

MR TAN

NRIC/Passport Number

S1350516J

Contact Number

97874606

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan Pg. 1

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Form must be completed by the Policyholder and/or the Authorised Driver.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>regudiate policy liability</u>.
- The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- 5. Any false reporting may be referred to the Police for investigation.
- The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
- By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
- 8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of;
 - processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims. (collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents(Including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to ail insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

Policyholder Signature Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

 $\tau_{i,T}=i$ SKETCH PLAN DESCRIBE CIRCUMSTANCES OF THE ACCIDENT DECLARATION I/We declare the foregoing particulars are true in every respect.

Policyholcer's Signature

Date & Time:

Driver's Signature

Date & Time:

(If driver is not the policyholder)

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:



LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Page No.:1 of 1

(A)		PRE-REPAIR IN	SPECTION REPORT		
MS FIRST CAPITAL INSURANCE LTD		Ref: CS3/FCI19017795/Gcf3e2			
36 ROBINSON ROAD #16-01 CITY HOUSE SINGAPORE 068877		Date: 23-10-2019			
			Code: FCI2		
1.		Policy Particula	ars :- (THIRD PARTY CLAIM	0	
	Insured Veh.	SHC 7670J	Veh. Inspected	SLF 1734K	
	Policy No.	1	Coverage (\$)	0.00	
	Claim No.	D19006459MFSH	Excess (\$)	0.00	
	Assign From	MERINA CHIA SAN SAN	Assign Date	09/10/2019	
2.		Vehicle P	articulars & Condition		
	Make & Model	HONDA VEZEL 1.5X	c.c	1496	
	Engine No.	HIDDEN	Year of Reg.	2016	
	Chassis No.	RU11113143	Colour	SILVER	
	Odometer	111074 KM	Steering	IN ORDER	
	Brakes	IN ORDER	Modification	STANDARD ALLOY RIM	
	General	GOOD			
3.		Cor	nditions of Tyres		
		Size	Make	Balance	
	R/H Front Tyre	215/60 R16	DUNLOP	5 mm	
	L/H Front Tyre	215/60 R16	DUNLOP	5 mm	
	R/H Rear Tyre	215/60 R16	DUNLOP	5 mm	
	L/H Rear Tyre	215/60 R16	DUNLOP	5 mm	
4.		Descr	iption of Damages		
	THE VEHICLE SU	STAINED DAMAGES AT THE O/S FRONT PORTION.			
5.		Gen	neral Information		
	Accident Date	05/10/2019	Inspect Date / Time	09/10/2019 (04:00 PM)	
	Survey held at	KUM CHEW MOTOR WORK	SHOP		
		160 SIN MING DRIVE #05-08	SIN MING AUTOCITY SINGAR	PORE 575722	
5a.			Remarks		
	B) THE REPAIR E THE REPAIRER V	STIMATE WAS NOT PRESEN VAS TOLD TO PREPARE THE EASE FIND DAMAGED VEHIO			

Report Ref No. CS3/FCI19017795/Gcf3e2

Inspected By

XING GUO QIANG

Automotive Assessor

M.MATAI, AMSAE-A

K.K.LAU CPT(RET)

 ${\sf BEng(Hons), B.Bus, MBA, PEng, PE, MInstAEA, MASME, MIRTE}$

REGD Auto Consultant-SAE, Licensed Appraiser

DISCLAIMER OF LIABILITY TO THIRD PARTIES: This Report is made solely for the use and benefit of the Client named on the front page of this Report.

No liability of responsibility whatsoever, in contact or tort, is accepted to any third party who may reply on the Report wholly or in part. Any third party acting or replying on this Report, in whole or in part, does so at his or her own risk.